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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/791,820			ing Date 04/2004	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN	
FOR			NUMBER FILED			NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE	_
BASIC FEE			NUMBER FILED		1101	N/A		N/A	1 22 (4)		N/A		. (♥/
(37 CFR 1.16(a), (b), or (c))								14// 4	, '	l			
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A			N/A		N/A			N/A		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A			N/A		N/A		1	N/A		
TOTAL CLAIMS (37 CFR 1.16(i))				mir	us 20 = *	*		x \$ =		OR	x \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))				m	inus 3 = *	•		x \$ =			x \$ =		
☐APPLICATION SIZE FEE (37 CFR 1.16(s))			If the specification and draw sheets of paper, the applica is \$250 (\$125 for small entit additional 50 sheets or fracti 35 U.S.C. 41(a)(1)(G) and 3			on size fee due for each n thereof, See							
	MULTIPLE DEPEN	AIM PRI	ESENT (3	7 CFR 1.16(j))									
* If the difference in column 1 is less than zero, enter *0" in column 2.								TOTAL			TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER THAN		
AMENDMENT	04/11/2007	CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDIT FEE	
	Total (37 CFR 1.16(i))	* 8		Minus	 20	= 0		x \$ =		OR	X \$50=	()
	Independent (37 CFR 1.18(h))	• 1		Minus	***3	= 0		x \$ =		OR	X \$200=)
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Colum			(Column 2)	(Column 3)							
AMENDMENT	00/20167	CLAIN REMAIN AFTE AMENDI	IING R		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDIT FEE	IONAL : (\$)
	Total (37 CFR 1.16(i))	* 5	8	Minus	" 7º			x \$ =	1	OR	x \$ =		
	Independent (37 CFR 1.16(h))	*	1	Minus	3	:		X \$,=		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))						1						
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))						H			OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** lf *** l	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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